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**TO: Economic Support Supervisors
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**FROM: Amy Mendel-Clemens
Communications Section
Bureau of Health Care Eligibility**

BHCE/BWP OPERATIONS MEMO

No.: 03-75

Date: 12/19/2003

Non W-2 [X] W-2 [] CC []

PRIORITY: High

SUBJECT: MEDICAID JOINT ACCOUNTS

CROSS REFERENCE: Medicaid Handbook Appendix 11.4.0

EFFECTIVE DATE: January 1, 2004

PURPOSE

This memo explains the new Medicaid (MA) joint account policy and gives instructions on how to make entries into CARES.

BACKGROUND

In July of 2000, the MA policy regarding joint accounts was changed to the "equal share" concept that currently exists. This was done to make MA policy consistent with other public assistance programs and having a uniform policy within the MA program itself. At that time, assets were counted for Family Medicaid (AFDC Related) eligibility determinations as they are now for Elderly, Blind, and Disabled (SSI Related) eligibility determinations. Prior to July 2000, the joint account policy was different for these two categories of MA.

Now, however, assets are not counted for Family MA so conflicting asset policies for joint accounts within the MA program are no longer a concern. The new policy will essentially reflect the pre-July 2000 policy for handling joint accounts and will once again conform with SSI rules pertaining to joint accounts.

POLICY CHANGECURRENT POLICY

An equal share is assigned to each client who is a holder of the joint account. If there are three account holders, each is assigned 1/3 of the account's value. It didn't matter if the account holders are EBD-MA applicants or recipients.

NEW POLICY

This revised policy should be applied on all new applications, reviews, and changes for EBD Medicaid eligibility determinations after the effective date of this memo.

If an EBD-MA applicant or recipient jointly owns an account with **another EBD-MA applicant or recipient**, allocate an equal share to each EBD-MA applicant or recipient.

NOTE ➤ "Equal Share" means an amount in proportion to the number of EBD-MA applicant/recipient account holders. If there are three holders, equal share means each is deemed 1/3 of the account balance.

If an EBD-MA applicant or recipient jointly owns an account with any other person, **who is not an EBD-MA applicant or recipient**, allocate the full share of the account to the EBD- MA applicant or recipient.

NOTE ➤ "Full share" means an amount equal to the account balance. The account balance is the total of the principle and any interest retained in the account, minus any withdrawal penalties or charges.

Apply this policy to savings, checking, share accounts, certificates of deposit, and similar arrangements where the holders have equal access to the funds. Please remember that this policy only applies to joint accounts.

Do not apply this policy to joint assets such as vehicles or real property. Refer to the MA handbook appendix 11.4.1 for a list of joint accounts that are exempt from this policy.

Application of this policy in certain situations may result in considering available to a fiscal test group more money from a joint account than is actually the balance in that account. If that occurs, deem an equal share to each account holder who is in the fiscal test group.

CARES CHANGES

Screen AAJO has a new field, "EBD-MA applicant/recipient". Enter <Y> if the person listed is an elderly, blind, or disabled MA applicant or recipient. The entry of <Y> or <N> will instruct CARES on how the account should be allocated. If the other holder(s) of the shared account are in the fiscal test group, complete an AAJO screen for each of the account holders. If the other account holders are not in the FTG, only complete one AAJO screen sequence for the MA recipient.

CARES will apply the MA joint account policy to the following codes from Table TLQA:

CC-Christmas Club
CH-Checking Account

CU-Credit Union
 ES- Escrow account for home sale
 MM-Money Market Account
 SA- Savings Account
 SC- Savings Certificate
 ST- Stocks and bonds
 US-United States Savings Bond

EXAMPLE 1

Joy is married to Ted and both receive EBD MA. They have a joint savings account of \$3200. Enter the \$3200 on AALA for Joy and complete AAJO with 02 as the shortlist number, indicate <Y> for the spouse in the "EBD-MA applicant/recipient" field. Complete another AALA for Ted with \$3200 and enter 01 as the shortlist number on AAJO and <Y> in the "EBD-MA applicant/recipient" field. CARES will assign the AG \$3200 on EEAD.

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AALA                                LIQUID ASSETS                                12/01/03 08:26
CASE: 3000519238                    WORKER: XCTG04      XCTG04 P KIERN
LAST UPDATED: 12 01 03              CASE STATUS: PENDING CASE MODE: INTAKE

LIQUID ASSET TYPES:

NUM: 01 OWNER NAME: JOY              JOINTACCOUNT              SSN: 324 33 2423

DC: __ BEGIN MMY: 1203  END MMY: ____
SEQ                                JOINTLY OWNED  AVAILABLE  BURIAL
NUM: 002 TYPE: SA SAVINGS ACC  VR: AF  (Y/N/?): Y  (Y/N/?): Y  (Y/N/?): N
ASSET AMOUNT: 3200.00          VR: AF  INDEPENDENCE ACCOUNT? (Y/N): N
                                IND ACCT REGISTRATION DATE: __ __ __
ACCOUNT NUMBER: _____      PRE-IND ACCT BAL AMOUNT: _____
INSTITUTION NAME: _____
INSTITUTION ADDRESS: _____
                                CITY: _____ STATE: __ ZIP: _____
-----INDIVIDUALS-----
01 JOY  J (PP )    02 TED  J (HUS)
PFKEYS: 20=AAJO
  
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AAJO                                JOINTLY OWNED ASSETS                                12/01/03 08:26
CASE: 3000519238                    WORKER: XCTG04      XCTG04 P KIERN
LAST UPDATED: 12 01 03              CASE STATUS: PENDING CASE MODE: INTAKE

NUM: 01 OWNER NAME: JOY              JOINTACCOUNT              SSN: 324 33 2423
BEGIN MMY: 1203  END MMY: ____

ASSET SEQ NUM: 002  ASSET TYPE: LA LIQUID ASSET  SUB-TYPE: SA SAVINGS A
----- JOINT OWNER INFORMATION -----
                                EBD-MA
DC  NUM  FIRST  MI  LAST  SUF  VR  APPLICANT /
                                RECIPIENT
__  02  TED    _  JOINTACCOUNT    _  BS  Y
__  _    _      _  _      _      _  _  _
  
```

AALA LIQUID ASSETS 12/01/03 08:27
CASE: 3000519238 WORKER: XCTG04 XCTG04 P KIERN
LAST UPDATED: 12 01 03 CASE STATUS: PENDING CASE MODE: INTAKE

LIQUID ASSET TYPES:

NUM: 02 OWNER NAME: TED JOINTACCOUNT SSN: 394 02 9489

DC: __ BEGIN MMY: 1203 END MMY: __

SEQ JOINTLY OWNED AVAILABLE BURIAL
NUM: 001 TYPE: SA SAVINGS ACC VR: AF (Y/N/?): Y (Y/N/?): Y (Y/N/?): N
ASSET AMOUNT: 3200.00 VR: BS INDEPENDENCE ACCOUNT? (Y/N): N
IND ACCT REGISTRATION DATE: __ __ __
ACCOUNT NUMBER: __ PRE-IND ACCT BAL AMOUNT: __
INSTITUTION NAME: __
INSTITUTION ADDRESS: __
CITY: __ STATE: __ ZIP: __

-----INDIVIDUALS-----

AAJO JOINTLY OWNED ASSETS 12/01/03 08:25
CASE: 3000519238 WORKER: XCTG04 XCTG04 P KIERN
LAST UPDATED: 12 01 03 CASE STATUS: PENDING CASE MODE: INTAKE

NUM: 02 OWNER NAME: TED JOINTACCOUNT SSN: 394 02 9489
BEGIN MMY: 1203 END MMY:

ASSET SEQ NUM: 001 ASSET TYPE: LA LIQUID ASSET SUB-TYPE: SA SAVINGS A
----- JOINT OWNER INFORMATION -----

DC	NUM	FIRST	MI	LAST	SUF	VR	EBD-MA APPLICANT / RECIPIENT
__	01	JOY	__	JOINTACCOUNT	__	BS	Y
__	__	__	__	__	__	__	__

EEAD ASSET ELIGIBILITY DETERMINATION 12/01/03 08:35
CASE: 3000519238 CAT: NS SEQ: 01 WORKER: XCTG04 XCTG04 P KIERN
DETERMINATION DATE: 12 01 03 AG STATUS: DENIED ELIGIBILITY STATUS: FAI
PAYMENT BEGIN DATE: 01 01 04 PAYMENT END DATE: FS CAT. ELIGIBLE: N
ASSET WAIVER GROUP:

----- COUNTED ASSETS -----		
	SFU/AG	DEEMERS
VEHICLE ASSETS	.00	.00
LIQUID ASSETS	3200.00	.00
REAL PROPERTY ASSETS	.00	.00
PERSONAL PROPERTY ASSETS	.00	.00
LIFE INSURANCE ASSETS	.00	.00
LUMP SUM ASSETS	.00	.00
BURIAL ASSETS	.00	.00
DEEMED ASSETS	.00	
ASSET ALLOCATED OUT	.00	ASSET DIVESTMENT RESULTS
ASSET ALLOCATED IN	.00	INELIGIBILITY BEGIN DATE
TOTAL COUNTED ASSETS	3200.00	INELIGIBILITY END DATE
ASSET LIMIT	3000.00	NUMBER OF MONTHS INELIGIBLE
OVERAGE AMOUNT	200.00	AMOUNT TO SATISFY

THE AG FAILED THE ASSET ELIGIBILITY DETERMINATION

NEXT TRAN: __ PARMS: 3000519238/NS /01/010104 MORE..

EXAMPLE 2

Kayla lives in County A, her sister Rachel lives in County B. They both receive EBD-MA and hold a joint savings account of \$3000. The worker in County A will enter \$3000 on AALA for Kayla, then on AAJO enter shortlist #99 for her sister Rachel and enter <Y> in the "EBD-MA applicant/recipient" field. Rachel's worker in County B will need to enter the same information on AALA and AAJO for her sister Kayla. CARES will allocate \$1500 to each sister.

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AAJO                JOINTLY OWNED ASSETS                12/01/03 08:09
CASE: 3000519238                WORKER: XCTG04        XCTG04 P KIERN
LAST UPDATED: 12 01 03                CASE STATUS: PENDING CASE MODE: INTAKE

NUM: 01 OWNER NAME: KAYLA                JOINTACCOUNT        SSN: 324 33 2423
BEGIN MMY: 1203 END MMY:

ASSET SEQ NUM: 001  ASSET TYPE: LA LIQUID ASSET        SUB-TYPE: SA SAVINGS A
----- JOINT OWNER INFORMATION -----
```

DC	NUM	FIRST	MI	LAST	SUF	VR	EBD-MA APPLICANT / RECIPIENT
___	99	RACHEL	___	SMITHY	___	BS	Y
___	___	___	___	___	___	___	___
___	___	___	___	___	___	___	___
___	___	___	___	___	___	___	___

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EEAD                ASSET ELIGIBILITY DETERMINATION        12/01/03 08:10
CASE: 3000519238 CAT: MS  SEQ: 01  WORKER: XCTG04        XCTG04 P KIERN
DETERMINATION DATE: 12 01 03        AG STATUS: OPEN        ELIGIBILITY STATUS: PAS
PAYMENT BEGIN DATE: 01 01 04 PAYMENT END DATE:        FS CAT. ELIGIBLE: N
ASSET WAIVER GROUP:

----- COUNTED ASSETS -----
                SFU/AG                DEEMERS
VEHICLE ASSETS                .00                .00
LIQUID ASSETS                1500.00                .00
REAL PROPERTY ASSETS                .00                .00
PERSONAL PROPERTY ASSETS                .00                .00
LIFE INSURANCE ASSETS                .00                .00
LUMP SUM ASSETS                .00                .00
BURIAL ASSETS                .00                .00
DEEMED ASSETS                .00
ASSET ALLOCATED OUT                .00  ASSET DIVESTMENT RESULTS
ASSET ALLOCATED IN                .00  INELIGIBILITY BEGIN DATE
TOTAL COUNTED ASSETS                1500.00  INELIGIBILITY END DATE
                ASSET LIMIT                2000.00  NUMBER OF MONTHS INELIGIBLE
                OVERAGE AMOUNT                .00  AMOUNT TO SATISFY
THE AG PASSED THE ASSET ELIGIBILITY DETERMINATION

NEXT TRAN: _____  PARMS: 3000519238/MS/01_____  MORE..
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EXAMPLE 3

Mark and Marilyn are married, living together, and in the same fiscal test group. They have a \$1500 joint checking account. Mark receives EBD-MA and Marilyn does not. Complete an AALA and AAJO screen for Mark and one for Marilyn. Code the "EBD applicant/recipient" field as <Y> for Mark and <N> for Marilyn. The fiscal test group will have the full \$1500 allocated to it.

AALA LIQUID ASSETS 12/01/03 09:02
CASE: 4000519247 WORKER: XCTG04 XCTG04 P KIERN
LAST UPDATED: 12 01 03 CASE STATUS: PENDING CASE MODE: INTAKE

LIQUID ASSET TYPES:

NUM: 01 OWNER NAME: MARK JTACCT SSN: 132 31 2312

DC: __ BEGIN MMY: 1203 END MMY: __

SEQ JOINTLY OWNED AVAILABLE BURIAL
NUM: 001 TYPE: CH CHECKING AC VR: BS (Y/N/?): Y (Y/N/?): Y (Y/N/?): N
ASSET AMOUNT: 1500.00 VR: BS INDEPENDENCE ACCOUNT? (Y/N): N
IND ACCT REGISTRATION DATE: __ __ __
ACCOUNT NUMBER: __ PRE-IND ACCT BAL AMOUNT: __
INSTITUTION NAME: __
INSTITUTION ADDRESS: __
CITY: __ STATE: __ ZIP: __

-----INDIVIDUALS-----
01 MARK J (PP) 02 MARIL J (WIF)

PFKEYS: 20=AAJO
NEXT TRAN: __ PARMS: 4000519247 MORE..

AAJO JOINTLY OWNED ASSETS 12/01/03 08:58
CASE: 4000519247 WORKER: XCTG04 XCTG04 P KIERN
LAST UPDATED: 12 01 03 CASE STATUS: PENDING CASE MODE: INTAKE

NUM: 01 OWNER NAME: MARK JTACCT SSN: 132 31 2312
BEGIN MMY: 1203 END MMY:

ASSET SEQ NUM: 001 ASSET TYPE: LA LIQUID ASSET SUB-TYPE: CH CHECKING
----- JOINT OWNER INFORMATION -----

DC	NUM	FIRST	MI	LAST	SUF	VR	EBD-MA APPLICANT / RECIPIENT
__	02	MARILYN	__	JTACCT	__	BS	N
__	__	__	__	__	__	__	__
__	__	__	__	__	__	__	__
__	__	__	__	__	__	__	__

-----INDIVIDUALS-----
01 MARK J (PP) 02 MARIL J (WIF)

PRESS ENTER TO RETURN TO THE ASSET SCREEN

AALA LIQUID ASSETS 12/01/03 08:59
CASE: 4000519247 WORKER: XCTG04 XCTG04 P KIERN
LAST UPDATED: 12 01 03 CASE STATUS: PENDING CASE MODE: INTAKE

LIQUID ASSET TYPES:

NUM: 02 OWNER NAME: MARILYN JTACCT SSN: 304 29 0482

DC: __ BEGIN MMY: 1203 END MMY: __

SEQ JOINTLY OWNED AVAILABLE BURIAL
NUM: 001 TYPE: CH CHECKING AC VR: BS (Y/N/?): Y (Y/N/?): Y (Y/N/?): N
ASSET AMOUNT: 1500.00 VR: BS INDEPENDENCE ACCOUNT? (Y/N): N
IND ACCT REGISTRATION DATE: __ __ __
ACCOUNT NUMBER: __ PRE-IND ACCT BAL AMOUNT: __
INSTITUTION NAME: __
INSTITUTION ADDRESS: __
CITY: __ STATE: __ ZIP: __

-----INDIVIDUALS-----

AAJO	JOINTLY OWNED ASSETS		12/01/03 08:59				
CASE: 4000519247	WORKER: XCTG04		XCTG04 P KIERN				
LAST UPDATED: 12 01 03	CASE STATUS: PENDING		CASE MODE: INTAKE				
NUM: 02 OWNER NAME: MARILYN		JTACCT	SSN: 304 29 0482				
BEGIN MMY: 1203 END MMY:							
ASSET SEQ NUM: 001		ASSET TYPE: LA LIQUID ASSET	SUB-TYPE: CH CHECKING				
----- JOINT OWNER INFORMATION -----							
DC	NUM	FIRST	MI	LAST	SUF	VR	EBD-MA APPLICANT / RECIPIENT
---	01	MARK	---	JTACCT	---	BS	Y
---	---	---	---	---	---	---	---
---	---	---	---	---	---	---	---
---	---	---	---	---	---	---	---
----- INDIVIDUALS -----							
01 MARK J (PP)		02 MARIL J (WIF)					

EEAD	ASSET ELIGIBILITY DETERMINATION		12/01/03 08:54	
CASE: 4000519247 CAT: MS	SEQ: 01	WORKER: XCTG04	XCTG04 P KIERN	
DETERMINATION DATE: 12 01 03	AG STATUS: OPEN		ELIGIBILITY STATUS: PAS	
PAYMENT BEGIN DATE: 01 01 04	PAYMENT END DATE:		FS CAT. ELIGIBLE: N	
ASSET WAIVER GROUP:				
----- COUNTED ASSETS -----				
	SFU/AG	DEEMERS		
VEHICLE ASSETS	.00	.00		
LIQUID ASSETS	1500.00	.00		
REAL PROPERTY ASSETS	.00	.00		
PERSONAL PROPERTY ASSETS	.00	.00		
LIFE INSURANCE ASSETS	.00	.00		
LUMP SUM ASSETS	.00	.00		
BURIAL ASSETS	.00	.00		
DEEMED ASSETS	.00			
ASSET ALLOCATED OUT	.00	ASSET DIVESTMENT RESULTS		
ASSET ALLOCATED IN	.00	INELIGIBILITY BEGIN DATE		
TOTAL COUNTED ASSETS	1500.00	INELIGIBILITY END DATE		
ASSET LIMIT	3000.00	NUMBER OF MONTHS INELIGIBLE		
OVERAGE AMOUNT	.00	AMOUNT TO SATISFY		
THE AG PASSED THE ASSET ELIGIBILITY DETERMINATION				
NEXT TRAN: _____ PARMS: 4000519247/MS/01_____ MORE..				

EXAMPLE 4

Larry is an EBD-MA recipient and he has a \$3000 joint account with Jane, also an EBD-MA recipient, and Mike, who is **not** an EBD-MA applicant/recipient. None of them live together. The worker for Larry's case will complete one AALA and one AAJO screen, coding Mike and Jane as 99 (out of the home), but with <Y> for Jane and <N> for Mike as "EBD-MA applicant/recipient". The worker for Jane would also complete an AALA and AAJO screen for her case too, coding Mike and Larry as 99 and entering <Y> for Larry and <N> for Mike as EBD-MA applicant/recipient. CARES will allocate \$1500 to Larry and \$1500 to Jane.

AALA LIQUID ASSETS 12/01/03 09:39
CASE: 5000519256 WORKER: XCTG04 XCTG04 P KIERN
LAST UPDATED: 12 01 03 CASE STATUS: PENDING CASE MODE: INTAKE

LIQUID ASSET TYPES:

NUM: 01 OWNER NAME: LARRY JOINTACCT SSN: 342 34 9820

DC: __ BEGIN MMY: 1203 END MMY: __
SEQ JOINTLY OWNED AVAILABLE BURIAL
NUM: 002 TYPE: SA SAVINGS ACC VR: BS (Y/N/?): Y (Y/N/?): Y (Y/N/?): N
ASSET AMOUNT: 3000.00 VR: BS INDEPENDENCE ACCOUNT? (Y/N): N
IND ACCT REGISTRATION DATE: __ __ __
ACCOUNT NUMBER: __
INSTITUTION NAME: __
INSTITUTION ADDRESS: __
CITY: __ STATE: __ ZIP: __

AAJO JOINTLY OWNED ASSETS 12/01/03 09:39
CASE: 5000519256 WORKER: XCTG04 XCTG04 P KIERN
LAST UPDATED: 12 01 03 CASE STATUS: PENDING CASE MODE: INTAKE

NUM: 01 OWNER NAME: LARRY JOINTACCT SSN: 342 34 9820
BEGIN MMY: 1203 END MMY:

ASSET SEQ NUM: 002 ASSET TYPE: LA LIQUID ASSET SUB-TYPE: SA SAVINGS A
----- JOINT OWNER INFORMATION -----

DC	NUM	FIRST	MI	LAST	SUF	VR	EBD-MA APPLICANT / RECIPIENT
__	99	JANE	__	JONES	__	BS	Y
__	99	MIKE	__	TURNER	__	BS	N

EEAD ASSET ELIGIBILITY DETERMINATION 12/01/03 09:19
CASE: 5000519256 CAT: MS SEQ: 01 WORKER: XCTG04 XCTG04 P KIERN
DETERMINATION DATE: 12 01 03 AG STATUS: OPEN ELIGIBILITY STATUS: PA
PAYMENT BEGIN DATE: 01 01 04 PAYMENT END DATE: FS CAT. ELIGIBLE: N
ASSET WAIVER GROUP:

	SFU/AG	DEEMERS
VEHICLE ASSETS	.00	.00
LIQUID ASSETS	1500.00	.00
REAL PROPERTY ASSETS	.00	.00
PERSONAL PROPERTY ASSETS	.00	.00
LIFE INSURANCE ASSETS	.00	.00
LUMP SUM ASSETS	.00	.00
BURIAL ASSETS	.00	.00
DEEMED ASSETS	.00	
ASSET ALLOCATED OUT	.00	ASSET DIVESTMENT RESULTS
ASSET ALLOCATED IN	.00	INELIGIBILITY BEGIN DATE
TOTAL COUNTED ASSETS	1500.00	INELIGIBILITY END DATE
ASSET LIMIT	2000.00	NUMBER OF MONTHS INELIGIBLE
OVERAGE AMOUNT	.00	AMOUNT TO SATISFY

THE AG PASSED THE ASSET ELIGIBILITY DETERMINATION

NEXT TRAN: __ PARMS: 5000519256/MS /01/010104 MORE.

CONTACTS

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Telephone: (608) 261-6317 (Option #1)
Fax: (608) 267-2269

Note: Email contacts are preferred. Thank you.

DHFS/DHCF/BHCE/LA